

# PGY2 Pharmacy Residency – Infectious Diseases - Aurora Health Care Metro, Inc.

## Program Structure

Residents completing the PGY2 Pharmacy Residency – Infectious Diseases – Aurora Health Care Metro, Inc pharmacy residency program are based at Aurora St. Luke’s Medical Center (ASLMC), located in Milwaukee, WI. During their program, residents may complete learning experiences at Aurora Sinai Medical Center in Milwaukee, and/or at other sites as noted below. One required learning experience is only offered outside of ASLMC (clinical microbiology), and up to one additional required learning experience may be completed outside of ASLMC (Infectious Diseases Consult Service). Additionally, the elective learning experience Pharmacy School Teaching Experience, if selected, is completed outside of ASLMC. All other learning experiences are completed at ASLMC.

Required (CORE) Learning Experiences		
Learning Experience	Typical Duration	Comments/Location
CORE: Orientation/Training	6 weeks	Orientation/Training shortened to two weeks if resident completed PGY1 at ASLMC Location: ASLMC
CORE: Clinical Microbiology	4 weeks	Location: ACL Central Microbiology Lab located within Aurora West Allis Medical Center
<b><u>Infectious Diseases &amp; Antimicrobial Stewardship</u></b> <ul style="list-style-type: none"> <li>• CORE: Infectious Diseases &amp; Antimicrobial Stewardship I</li> <li>• CORE: Infectious Diseases &amp; Antimicrobial Stewardship II</li> <li>• CORE: Infectious Diseases &amp; Antimicrobial Stewardship III</li> </ul>	6-8 weeks	Resident completes all 3 learning experiences throughout the course of residency year ASLMC (with remote surveillance of all WI sites) ID & ASP II includes option for on site activities at additional locations
CORE: Infectious Diseases Consult Service	4-6 weeks	Learning Experience occurs during second half of the year, as learning experience consists of independent rounding with ID service ASLMC +/- ASLSS, ASMC depending on physician group availability
CORE: Year Long Residency Project	Concurrently over 12 months	Year Long Project work occurs concurrently with other scheduled Learning Experiences. Residents typically spend 1-2 hours per week on average on Year Long Project learning experience expectations.

CORE: Writing Project	Concurrently over 12 months*	The writing project occurs concurrently with other scheduled Learning Experiences. *The writing project may also be concentrated into the “research elective” based on resident goals ASLMC
CORE: Site & PICS Staffing	Concurrently over 12 months	Staffing includes: <ul style="list-style-type: none"> <li>1 x 10.5hr shift on a Sat and 1 x 10.5hr shift on a Sun every 3<sup>rd</sup> weekend, 2 holidays, and 1 x 4.5-hr PM PICS shift every 3 weeks</li> <li>Residents rotate through site-based decentral staffing (ASLMC), site-based central pharmacy (ASLMC), and PICS (Remote)</li> </ul>
CORE: PGY2 Noon Conference/Journal Club	Concurrently over 12 months	Resident completes 1 lunchtime presentation per month (primary literature based complex case or journal club) to the combined critical care, cardiology, and infectious diseases preceptor group. ASLMC
CORE: Medication Safety and Optimizing the Medication-Use Process	Concurrently over 12 weeks	Occurs concurrently with other scheduled Learning Experiences. When on this learning experience, residents spend 1 hour per week on average on Medication Safety learning experience expectations. ASLMC
CORE: CE Presentation	Concurrently over 12 weeks	Occurs concurrently with other Learning Experiences. The resident will prepare and present a 1-hour CPE-accredited presentation. When on this learning experience, residents spend 1-2 hours per week on average on Clinical Forum learning experience expectations. ASLMC
<b>Elective Learning Experiences</b> (# and duration of electives variable based on how many weeks available after filling in CORE learning experiences)		
<b>Learning Experience</b>	<b>Typical Duration</b>	<b>Comments/Location</b>
ELECTIVE: Abdominal Transplant Infectious Diseases	4-6 weeks	ASLMC
ELECTIVE: Stem Cell Transplant Infectious Diseases	4-6 weeks	ASLMC
ELECTIVE: Emergency Department	4-6 weeks	ASLMC
ELECTIVE: Medical/Respiratory Intensive Care Unit	4-6 weeks	ASLMC
ELECTIVE: Pharmacy School Teaching Experience	Concurrently over 6 weeks	Lecture(s) given to pharmacology students and/or elective infectious diseases pharmacy classes at CUW School of Pharmacy

ELECTIVE: Research	2-4 weeks	Research allows for the resident multiple options consisting of either a) concentrated work on writing project, b) additional time if needed for extensive system-wide residency projects (if widespread implementation/education needed that would take significant time from other learning experiences)
ELECTIVE: Surgical Intensive Care Unit	4-6 weeks	ASLMC
Locations: All sites are within a 30-minute drive from ASLMC ASLMC – Aurora St. Luke’s Medical Center Hospital (Milwaukee, WI)      PICS – Pharmacy Integrated Clinical Services ASMC – Aurora Sinai Medical Center Hospital (Milwaukee, WI)      ACL Labs – ACL Central Lab in West Allis Medical Center (Milwaukee, WI) ASLSS – Aurora St. Luke’s South Shore Hospital (Milwaukee, WI)		

\* Additional elective learning experiences may be developed based on resident interest and preceptor availability.

**Example Resident Schedule**

**PGY-2 ID Schedule Example**

Dates	Learning Experience/Included Areas
2 weeks *6 weeks for external candidates	-PGY1 Group Training Sessions -CORE: Orientation/Training: central order verification and ASLMC
4 weeks	CORE: Clinical Microbiology
4 weeks	ELECTIVE: Emergency Department
5 weeks	CORE: Infectious Diseases & Antimicrobial Stewardship I
4 weeks	ELECTIVE: Medical/Respiratory Intensive Care Unit
8 weeks	CORE: Infectious Diseases & Antimicrobial Stewardship II
4 weeks	CORE: Infectious Diseases Consult Service
6 weeks	ELECTIVE: Surgical Intensive Care Unit
4 weeks	ELECTIVE: Abdominal Transplant Infectious Diseases
4 weeks	ELECTIVE: Research
8 weeks	CORE: Infectious Diseases & Antimicrobial Stewardship III

**Longitudinal Learning Experiences:**

- CORE: Staffing @ ASLMC
- CORE: PGY2 Cards/Critical Care/ID noon conference
- CORE: Year Long Research Project
- CORE: Writing Project – *independent of YLP*
- CORE: Medication Safety and Optimizing the Medication-Use Process
- CORE: Pharmacy Grand Rounds

**Conference attendance:**

- ID Week (fall)
- Wisconsin Pharmacy Residency Conference (spring)

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### Program Completion Requirements

The Resident must complete all Completion Requirements to be eligible to receive a program completion certificate. Requirements in green are required in all WI-based Advocate Health Pharmacy Residency programs. Requirements in blue are specific to the program.

Completion Requirement	Learning Experience the requirement is typically addressed (Associated Objective, if applicable)	Location of Documentation	Q1 Status Not started; planned for (month)  In progress; anticipate completion (month)  Completed (date)	Q2 Status Not started; planned for (month)  In progress; anticipate completion (month)  Completed (date)	Q3 Status Not started; planned for (month)  In progress; anticipate completion (month)  Completed (date)	End of Residency  Completed (date) *if not completed, resident is not eligible for completion certificate
WI Pharmacist Licensure as per residency program policy	NA	Workday				
Completed Training Manual & Competencies	CORE: Orientation/Training	Returned to site manager/director				
Leadership Development Series: attendance and active participation	NA	NA				
Presentation at WPRC (or equivalent conference, if necessary)	CORE: Year Long Residency Project (R2.2.6)	Resident Files in PharmAcademic™ (final slides, poster pdf)				
Completed Project Manuscript in publishable format	CORE: Year Long Residency Project (R2.2.6)	Resident Files in PharmAcademic™				
ASHP-required educational objectives: • At least 66% (22 of 33) of ASHP-	NA	PharmAcademic™				Final % ACHR:

<p>required objectives evaluated as “Achieved for Residency” (ACHR)</p> <p>And</p> <ul style="list-style-type: none"> <li>No objectives evaluated as Needs Improvement (NI) by the final time the objective is evaluated</li> </ul>						
Complete Appendix requirements (see ASHP CAGOs document)	See final page	PharmAcademic™				
<p>Complete Staffing Shifts:</p> <ul style="list-style-type: none"> <li>1 x 10.5 hr shift on a Sat and 1 x 10.5 hr shift on a Sun every 3<sup>rd</sup> weekend</li> <li>2 holidays</li> <li>1 x 4.5 hr PM shift every 3 weeks</li> </ul>	CORE: Site & PICS Staffing	Resident Portfolio (Days worked track record)				
Prepare at a minimum, one drug class review or monograph, AND one treatment guideline or protocol as designated by the needs of the ASP Committee	CORE Infectious Diseases & Antimicrobial Stewardship I, II, or III (R2.1.3, R2.3.2)	Resident Portfolio In PharmAcademic™				

Complete one medication safety project	CORE: Medication Safety and Optimizing the Medication-Use Process (R2.1.3)	Resident Portfolio In PharmAcademic™				
Complete one departmental or system leadership project (e.g., newsletter article, meeting presentation)	CORE: Medication Safety and Optimizing the Medication-Use Process (R2.1.2)	Resident Portfolio In PharmAcademic™				
Create and present one accredited Continuing Pharmacy Education (CPE) program	CORE: Pharmacy Grand Rounds (R4.1.1 & R4.1.2)	Resident Portfolio In PharmAcademic™ (final slides uploaded)				
Create two written manuscripts suitable for submission to a peer-reviewed journal.	CORE: Year-Long Residency Project, CORE: Writing Project (R.2.2.6, R3.3.2, R4.1.3)	Resident Portfolio In PharmAcademic™				
Prepare and present the annual antibiogram review to the System ASP Committee	CORE: Clinical Microbiology (R1.3.1, R1.3.2, R2.2.3)	Resident Portfolio In PharmAcademic™				
Actively participate in an SIDP committee	NA	Email evidence to RPD				
Prepare and present at minimum one journal club style presentation to a department meeting and/or system ASP	CORE: PGY2 Noon Conference/Journal Club (R4.1.2)	Resident Portfolio In PharmAcademic™				

<b>Acknowledgements</b>				
	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>End of residency</b>

Resident	Signature: Date:	Signature: Date:	Signature: Date:	Signature: Date:
RPD	Signature: Date:	Signature Date:	Signature Date:	Signature Date:

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### Resident Development Plan

Resident’s Self-Reflection and Self Evaluation						
Self-Reflection includes Strengths, Opportunities for Improvement, Practice Interests, Career Goals, and Well-being and Resilience. Self-Evaluation is related to the Program’s Competency Areas						
	Initial		Quarter 1	Quarter 2	Quarter 3	
Date						
Personal Strengths and Weaknesses:	From initial self-reflection: Personal Strengths:  Personal areas of Improvement:					
Practice Interests/ Career Goals	From initial self-reflection: Practice Interest (in order of preference):  Career Goals:		Changes to: Practice Interests  Career Goals:	Changes to: Practice Interests  Career Goals:	Changes to Practice Interests  Career Goals:	
Well-being and Resilience:	From initial self-reflection: Current well-being strategies from initial self-reflection:		Current well-being:	Current well-being:	Current well-being:	
Strengths and Areas of Improvement Related to Competency Areas	R1	From Initial Self-Evaluation Strengths:  Opportunities for Improvement:	Progress on Previous Opportunities for Improvement:  Strengths:  New Opportunities for Improvement:	Progress on Previous Opportunities for Improvement:  Strengths:  New Opportunities for Improvement:	Progress on Previous Opportunities for Improvement:  Strengths:  New Opportunities for Improvement:	

	R2	From Initial Self-Evaluation: Strengths:  Opportunities for Improvement:	Progress on Previous Opportunities for Improvement:  Strengths:  New Opportunities for Improvement:	Progress on Previous Opportunities for Improvement:  Strengths:  New Opportunities for Improvement:	Progress on Previous Opportunities for Improvement:  Strengths:  New Opportunities for Improvement:
	R3	From Initial Self-Evaluation: Strengths:  Opportunities for Improvement:	Progress on Previous Opportunities for Improvement:  Strengths:  New Opportunities for Improvement:	Progress on Previous Opportunities for Improvement:  Strengths:  New Opportunities for Improvement:	Progress on Previous Opportunities for Improvement:  Strengths:  New Opportunities for Improvement:
	R4	From Initial Self-Evaluation: Strengths:  Opportunities for Improvement:	Progress on Previous Opportunities for Improvement:  Strengths:  New Opportunities for Improvement:	Progress on Previous Opportunities for Improvement:  Strengths:  New Opportunities for Improvement:	Progress on Previous Opportunities for Improvement:  Strengths:  New Opportunities for Improvement:
<b>RPD: Assessment of Strengths and Opportunities for Improvement Related to the Program's Competency Areas</b>					
Date					
		Strengths:  Opportunities for Improvement:	Progress on Previous Opportunities for Improvement:  Strengths:  New Opportunities for Improvement:	Progress on Previous Opportunities for Improvement:  Strengths:  New Opportunities for improvement:	Progress on Previous Opportunities for Improvement:  Strengths:  New Opportunities for Improvement:
<b>RPD: Planned Initial and Quarterly Changes to the Program**</b>					
	Initial		Quarter 1	Quarter 2	Quarter 3

Changes Related to Competency Areas:	Changes Related to Competency Areas:	Changes Related to Competency Areas:	Changes Related to Competency Areas:
Changes Related to Resident's Self Reflection:	Changes Related to Resident's Self Reflection:	Changes Related to Resident's Self Reflection:	Changes Related to Resident's Self Reflection:
*Changes are based on assessment of the resident's strengths and opportunities for improvement related to the program's Competency Areas and well as the resident's self-reflection of personal strengths and opportunities for improvement, practice interests, career goals, and well-being and resilience.			

Acknowledgements				
	Q1	Q2	Q3	End of residency
Resident	Signature: Date:	Signature: Date:	Signature: Date:	Signature: Date:
Primary Preceptor	Signature: Date:	Signature: Date:	Signature: Date:	Signature: Date:
RPD	Signature: Date:	Signature Date:	Signature Date:	Signature Date:

**Infectious Diseases Appendix**

Topic	LTD	READ	CASE	DPC	DPC+	Learning Experience	Dates
Bone and Joint Infections							
Cardiovascular Infections							
Central Nervous System Infections							
Fungal Infections							
Gastrointestinal Infections							
HIV and AIDS							
Intra-Abdominal Infections							
Neutropenic Fever							
Opportunistic Infections in Immunocompromised hosts							
Respiratory infections: upper and lower							
Sepsis							
Skin and Soft tissue infections							
Urologic Infections							
Viral Infections							
Fever of unknown origin*							
Hepatitis B*							
Hepatitis C*							
Ophthalmologic infections*							
Parasitic Infections*							
Reproductive Organ Infections*							
Rickettsial Infections*							
Sexually Transmitted Diseases*							
Tuberculosis and other mycobacterial Infections*							
Travel Medicine*							
Key: LTD=Lecture/Topic Discussion, READ=Readings, CASE=Case Presentation, DPC=Direct Patient Care, DPC+=Multiple Direct Patient Care Experiences *starred topics may be covered by non direct patient care activities							